FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees ETHICS AND for state office must be filed electronically and effective January 1, 2012, all A ETHICS AND Statements and reports filed by all committees for state office must be filed AIC NO STATE BENEFIT OF THE PROPERTY OF T

Effective May 1, 2010, all statements and reports for State PACs and State PACS a

| COMMITTEE NAME (Must be same as on Statement of Organi | ization) | | | |
|--|---|------------|--|---|
| Jones County Democratic Central | Committee | | FORM DR-2 | DISCLOSURE |
| IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) | State PAC (3 \State Party | (F | Rev. 12/2009) | REPORT |
| (4) County Central Committee (5) County Candidate (6) City Candida | ite (7) School Board or Other Political | | or Office Use On | ly Assa |
| Subdivision Candidate (8) County PAC (9) City PAC (10) School Bo 11) Local Ballot issue | varu or Other Political Subdivision PAC | \ I I | omm. # | ··· • • • • • • • • • • • • • • • • • • |
| CANDIDATE COMMITTEES ONLY: | | L | ogged in | · · · · · · · · · · · · · · · · · · · |
| Candidate Name | Political Party (if applicable) | s | canned | |
| | | 1 1 | - | |
| Office Sought | District (if Senate or House) | ^ | uaitea | |
| Late reports are subject to possible civil and criminal penalties. Pursi candidate's committee, and the chairperson, for any other type of cor | | | | |
| Candidate's committee, and the champerson, for any other type or com | milities, is the marriada responsible | ioi ming t | milely and accura | ate reports. |
| Jan (1) Wer | 219 417 2882 | | 1-11-21 |)//) |
| SIGNATURE OF PERSON FILING REPORT | 319-462-3882 TELEPHONE | - | DATES | IGNED |
| $\overline{\vee}$ U | TELEFTIONE | | | |
| I AM FILING A Report for Calendar Year 200 | <u>9</u> REPORT FOR (1) ELECTION | /(2)NON- | ELECTION YE | AR. |
| (report date) | Indicate by | • 2 | | |
| CHECK IF AMENDMENT TO REPORT DATED | | Local Com | mittees, enter Da | te of Election |
| Charles the in the form of the contract and the charles are | Discoulation Forms DD A | | | |
| | | | ounty & Local Committees, enter County in hich Election is held | |
| | | WINOI LICO | aut is field | |
| | | | | |
| STATEMENT OF CASH ON HAND | , , , , , , , , , , , , , , , , , , , | | | |
| STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total | Lof all funds held by the | | | |
| STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Tota committee. This amount MUST be the same as the ca of the last reporting period or must be zero if this is first | sh on hand at the end | \$ | 381. | 30 |
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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
|-------------------------------|--------------------------|
| | CK THIS BOX IF |

| 1 | | same as on Statement of Organization) | | | | |
|--------------------------------|--|--|------------------------|--|--------------------|----------|
| Jones | County C | Entral Central C | ommittee | | | |
| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPO (DESCRIBE TRA | ANSACTION) | AMOUNT EXPENDED | |
| | ID# | No checks issued, but | Monthy B | Bank | 90 | |
| | CK# | there was a 6000 monthly service | Monthy B Service | Charge | \$ 72 | |
| | ID# | charge paid to | 100 | r menth | for the | |
| | CK# | monthly service charge paid to Form Book | o pe | 77.071 | full year | 1 |
| | ID# | Monticello | | | | 1 |
| | CK# | Iowa | | | | |
| | ID# | · | | | | 1 |
| | CK# | | | | | |
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| | CK# | | | | | |
| | | | | SUB-TOTAL | \$ | 1, |
| | | | TOTAL (if last page | of this schedule) | \$ 72- | \vdash |

| THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY: | |
|--|-------------------------------------|
| Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. | (Refer to Schedule H instructions.) |

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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